The Hampden Hippocrat

A Bulletin for the Hampden District of the Massachusetts Medical Society

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Public Relations

The Massachusetts Medical Society has taken a forward step in the announcement that a full time Public Relations executive will become a part of the organization the first of July after due authorization.

This action is commendable for several reasons and is a phase that all medical societies should consider in this swift moving age.

The reasons are obvious but to provoke thought they are listed:

1. The people want to know what medicine is doing.

2. Patients want to hear about the activities of their doctors.

3. Women must be enlisted for volunteer hospital jobs and to enter the nursing profession.

4. Advancement of medical science affects every person who is a potential patient.

Let's look a little deeper into each of these things and discover what interest should be shown by every individual doctor and by the several societies of medical men.

Naturally people want to know what medicine is doing.In recent years there have been additions to the old stand-by treatments. Penicillin, streptomycin, the sulfas are all new and mysterious to the person to whom they will be administered.

The private lives of physicians normally are hinged on their public lives. What harm does it do to let the public in on his activities, his unusual cases and his advancements? A doctor is not supposed to be a mysterious creature riding a broomstick and brewing a concoction of herbs.

There is a great need throughout the country for women to work with doctors in hospitals, in the offices and in clinics. These women must learn about the profession through the mediums they read and trust. They must have the information in small doses in the language they understand. It must be done through the propagada medicine of the Public Relations specialist.

And finally the man who is walking the street as healthy as anyone can be may be down with a disease, an accident or a seizure the next moment. His mental fitness will be increased through a general knowledge of what is new.

Most organizations have found Pubic Relations to be the answer to problems that have existed. They have discovered a layman with only a general knowledge of their product; yet a commanding ability of skill at producing the results needed.

Newspapers are continually butting against a stone wall in the Springfield area in an attempt to discover something of vital importance during a working day. Doctors are reluctant to talk because of an old ethic that a medical man must not seek publicity.

Is it considered ill taste for the medical man to seek publicity when he needs a special type of blood? At that

Hampden Hippocrat

"Life is short and art is long, the occasion fleeting, experience fallacious and judgment difficult." —Hippocrates, 430 B.C.

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time he turns to the greatest medium of them all—publicity, and think of the countless times that lives have been saved by that great heart of human interest.

Doubtlessly many doctors have had unfortunate experiences when dealing with the newspapermen. A common complaint seems to be that they are "too inquisitive." The reaction of the doctor is to be short, or not to answer questions at all.

Stop for a moment and consider what the newsman is going to do with the information he receives. That's right—he's going to print it. In plain English that the doctor himself can read and that every interested person who buys that paper can read.

The newsman is not seeking personal information. He is as impersonal with a doctor as he is with a policeman or fireman or any of the dozens of other people he must seek information from.

It is old fashioned and even crude to tell a representative of a newspaper that you cannot give him information. is unfair to the thousands of people he represents and unfair to yourself.

What kind of a newpaper would you have if everyone adopted this attitude?

Address Correspondence to:
Dr. W. A. R. Chapin
121 Chestnut Street, Springfield, Mass.
Telephone 2-7213

In Springfield at this writing there are no newspapers. For five months the city has had to depend on other mediums and they have been poor substitutes. Creating a newspaper is an art in itself. It cannot be done without special "know-how" any more than a tonsilectomy can be done without previous instructions and practise.

Getting this point across it now comes to the question of who is qualified to act as a Public Relations specialist for a group of professional men in a highy scientific industry. Representative of a group of men who use words that leave the average citizen bewildered and who write words on a prescription blank that only a druggist can interpret?

Naturally it should not be a man who thinks in those terms and rattles off a news story containing little known words. Nor should it be a man so close to the situation that he cannot write a clear story that will make a perfectly plain picture to the man in the street.

The man selected for a job of this type should be well trained as a newspaperman, cognizant of the workings of a newspaper and its need.

He must have the confidence of those who employ him to a man and must have the cooperation of every man he represents. His specialty need not be medicine but he must have a profound interest in the work of the men he is doing business for.

It is possible, but not likely, that a man with these qualifications exists among the medical profession in Hampden County but hardly probable that there is one who has the time to devote to the job.

The point has been reached when it is almost imperative that Hampden County medical men associate themselves with a man with these qualifications and accept his ministrations.

The State has led the way in the localized area. The national association hs found it indispensable.

Supplement to Hampden Hippocrat

Winter Issue 1947

Action of Committee on Legislation of Massachusetts Medical Society on Bills January 22, 1947:

S. 10 Licensing of hospitals, convalescent and nursing homes, favor.

3. 26 Open hospitals to all licensed physicians, oppose.

S. 27 Hospital construction, oppose.

S. 29 Hospital Planning Board oppose.

S. 47 Antivivisection, oppose.

S. 51 Chiropractor Board. oppose.

S. 112 Hospital for inebriates, no action.

S. 254 Poliomyelitis investigation, oppose.

H. 51 Codification of insurance laws, no action.

H. 52 Codification of insurance laws, no action.

H. 69 Fees for mental examination, no action.

H. 70 Fees for mental examination in prisons, no action.

H. 78 Sanitary Code, Favor.

H. 79 Poisons for vermin, favor.

H. 80 Sanitary examination of police stations, no action.

H. 81 Adulteration of food with mineral oil, favor.

H. 82 Appointment of deputy commissioner. no action.

H. 83 Safe water supplies in rented houses, favor.

H. 143 Uemployment benefits, no action.

H. 145 Admissibility of blood tests in illegitimacy, favor.

H. 185 Eye glass advertising, no action.

H. 177 Acushnet River pollution, no action.

H. 274 Special committee to investigate public health law, no action.

H. 479 Sewage disposal, no action.

H. 641 Cash sickness compensation, no action.

H. 705 Tuberculosis in School teachers, favor (?) Favor principle but object to over-riding of private physicians report by State Department.

H. 706 College of Physicians and Surgeons. no action. Leave in hands of Mr. Dunn.

H. 794 Open hospitals to all licensed physicians, oppose.

H. 1132 Industrial insurance, no action.

H. 1229 Investigation mental hospitals, no action.

H. 1264 Antivivisection, oppose.

H. 1361 Antivivisection, oppose.

H. 1602 No action.

H. 1619 Industrial insurance, no action.

H. 1602 College of Physicians and Surgeons, no action at present. Leave in hands of Mr. Dunn.

A New Leeds!

Following court action concerning care of veterans at Leeds. the following is encouraging.

Something new has been added to the Veteran's Administration Hospital at Leeds.

That is somewhat untrue because the something new is Dr. Richard O'Neill who has been around the institution several years. Actually only the fact that he is now manager is new.

But in that new posiion Dr. O'Neill, a noted psychologist is able to carry out some of the ideas he has fostered through the years.

His number one idea is that mental patients can be cured. And figures available at the institution show that he is right.

Therapy in its newest style is being introduced and practised. Results may best be shown by examples.

Suicidal patients were heretofore considered in a last stage. Parts of clothing that might be used to further their tendencies were removed. Spoons were their only table implements and these were counted and checked after each meal.

Day in and night out the men were left in their locked ward to use their limited mental capacities in the thoughts of self destruction.

Once in a while they were herded together for forced recreation.

There were few cures!

Enter Dr. O'Neill and his Chief Sidney J. Kauffman, naval commander in the last war..

A movie projecter was taken into the ward one afternoon and the very latest film shown. The men were permitted to stay in the room if they liked; leave if they wanted to.

The first time a few stayed; as time went on, more and more. Some stared at the screen showing no emotion. Others responded. Attendants noted reactions and reported to Dr. O'Neill.

One day Kauffman came up with a daring idea. College girls majoring in psychology were anxious to help for the training they would get and the aid they would give.

"Why not," thought Kauffman. "Let these girls throw a party for the men."

He tried the idea on Dr. O'Neill and instead of red tape and dodges he received flat approval.

The party was held. The suicidals danced with the girls. Cake, ice cream and coke was paid for out of Kauffman's pocket.

Reaction? Attendants reported that the next day the generally listless and uncooperaive patients showed an inclination to help with the work. Some asked for something to do.

That was one treatment.

Example two:

The average doctor at the institution arrived ready to do what he could for as many patients as possible. For each patient he saw and treated he found he had to sign and fill out batches of forms and reports. It soon became an inigma. Reports took up more time than the patients. Then relatives took up still more time trying to get good news.

This, Dr. O'Neill figured out, was a waste of the doctor's time and a loss of possible recovery for the patient. So, without fanfare or involved conferences he brought about a system by which clerks took care of the forms and the doctor took care of the doctoring.

It is working out well although still in infancy. Doctors are seeing more

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patients and have more time for each patient. They sign their names once instead of dozens of times.

The patients will know some day what this means to them. The doctors know now.

Electro-therapy is in advanced stages and has shown marked effect. Those who have observed treatment know that the patient is aware of what is being done.

Often times there is a wait before treatment at the hospital. Patients often times know they are to have it the night before. In the morning of the proposed treatment there is marked nervousness among the groups that gather.

Beano was once considered able to keep the men occupied in mind while they waited this moment. But, actually no one really thought it did.

Kauffman, with the approval of Dr. O'Neill, is anxious to try something else. He wants to get a few "one-armed bandits" and some pinball machines.

"Those things have some thrill in them," Kauffman said, "The thrill should keep unhappy minds from an unpleasant subject."

There is no moral issue involved and none is to be inferred. The men need something to keep them occupied. The only thing holding up this experiment is obtaining the machines.

One can see the futility of a requisition to the government for a few "slot machines."

Organizations are forever giving some sort of gifts to the patients but unforunately decide among themelves what would be best for the men.

Instead of asking and learning that an old battered pinball game or slot machine would do the most good there have been unuseable gifts made.

At Christmas time thousands of razor blades were donated. Naturally the men have to shave. but it is a little unreasonable to expect a mental institution to pass out sharp steel to patients promiscuously.

A beautiful radio was given recently without being requested or suggested. It so happens that the radio could not be fitted into the system.

Parolees are permitted to leave the grounds, under supervision of course, and are stimulated by attending sports events or taking part in sports activity. Twenty or more attend wrestling and boxing matches. Others enjoy skiing, skating. fishing

A small amount of money would drain and dredge a brook on the hospital grounds which would be ideal as a casting pool. Trout and other fish can be obtained without trouble by hospital officials. To have the pool built would require much requisitioning

Any organization could perpetuate its name by hiring a contractor and having the job done

One man is responsible for heading these things up, but he is fortunate in having a staff of understanding subordinates. Where he is the impetus he has available the skill of interested persons to carry out his ideas.

Dr. O'Neill has already endeared himself to the staff of the hospital he heads and has the respect of the patients he is responsible for

But his is a strange philosophy because he wants to be out of a job as soon as possible. He wants the hopital cleared completely of the patients there now. He wants to see them returnd to their homes cured and able to take a place in society.

The men in the institution fought for their country and many are living under a fate worse than death. Given the opportunities and a free hand Dr. O'Neill will see to it that many of these men are released.

Space does not permit a complete

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word by word account of what is being done for rehabilitation, treatment and care. It is sufficient to say that these heroes of two wars are being given the best of care and most modern treatment

As time goes on more and more will leave the institution equipped to pick up the thread of life.

Only the skill of modern medicine and the discoveries of the years ahead can bring this about.

Another challenge to medical skill.

The Need for a Chronic Hospital

During the past few weeks the Hippocrat has made a preliminary survey of the need, in this locality, for a hospital devoted to patients requiring chronic care.The term "chronic care", of course, requires some definition, because not to be included in this category for the purposes of the present discussion are institutions for the treatment of such chronic illnesses as mental diseases, tuberculosis, drug addiction, and the like. A post card questionnaire was sent to 250 doctors in and around Springfield which read as follows:

"There is an organization which has asked the Hippocrat to find out the need for a chronic terminal care hospital in the Springfield area. Please answer as best you can and mail this card. If no comment, mail anyway.

How many adults do you know in your practice who would be better off in a good chronic hospital? How many would go there? Would a chronic hospital with only graduate nurses as supervisors of wards be worth considering? Such a hospital to need attendant care and not nursing care. Please sign your name."

Out of of a total of 250 cards, 106 were returned. Of these, 31 gave no answers to the first two questions, the remaining 75 physicians answered that they had in their practices a total of 637 adult patients who would be better off in a good chronic hospital than where they were at present, and that 319 of them would go there.

Sixty-seven doctors answered the last two questions. Of these, 54 felt that attendant care alone would suffice, 12 that it would not, one thought that a combination of the two would be a satisfactory solution.

Inquiries were also addressed to several hospital administrators both locally and throughout the state regarding the need for such an institution here and in other muncipalities faced with this problem. Several enthusiastic and pertinent replies were received, from which the following are quotations:

Dr. Eugene Walker, Superintendent of the Springfield Hospital wrote:

"This mere fact that the 51 bed chronic ward in this hospital, which is run for the Department of Public Welfare of the City of Springfield, has a waiting list shows that there are not enough beds for chronic diseases in Springfield. . . The nursing service in a chronic hospital can very well be done by graduate nurses with attendants under them . . . It is very definitely my feeling that a chronic disease hospital should be associated with an acute hospital so that chronic disease patients may have available all the facilities of an acute hospital as at times they are needed for these patients."

The following is from the reply of Dr. Charles F. Wilinsky, Director of the Beth Israel Hospital in Boston.

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"There is no question that the care of the chronic sick is a challenge which must be met by the members of every intelligent community . . . I do not subscribe at all to the principles of crowding up our acute hospitals with those who are going to need care for protracted periods of time, but whenever possible, a ward or a wing tied in closely with the Institution which houses the short-time patients offers both an economic and scientific approach to the best form of organized medical care for both acute and the chronic ill."

From Mr. G. Frank McDonald, Commissioner of Institutions of Boston, the following was received:

"In the Springfield area I would agree that there are at least 600 persons who would be better cared for in a chronic hospital rather than under the existing accommodations. Licensed boarding homes for the aged, some times called convalescent homes, have been attempting to carry on this work throughout the Commonwealth and from our view-point, very unsatisfactorily. Springfield and like municipalities, including Boston, are greatly in need of a chronic hospital . . . The Federal Government is cognizant of the fact that chronic hospitals are a need because they have made allownce in S-191, commonly called the Hospital Bill, to supplement the building of non-profit hospitals by granting 33 and one-third of the cost in Federal funds."

From an address delivered some months ago on this topic by Dr. E. M. Bluestone, Director of Montefiore Hospital in New York, the following is quoted:

"Anyone who wants distinctions continued should visit some of the isolated and segregated county hospitals, so-called hospitals for chronic disease, almshouses, poor-farms, and homes for the aged where clinical separation is encouraged in a confused and hopeless atmosphere on the score of duration of illness, age, prognosis, curability or economic condition and where patients vegetate their lives away under a cosmic curse. The scientific problem which the patient presents compels our attention and we must not be diverted in our planning by the complexity of this problem, or by its undesirability for one or other medical scientist, or yet by its possibilities as a poor investment. The public health worker will tell you that it is difficult, if not impossible, to keep half the house well while the other half is sick . . . As for the patient, if he does not possess the funds with which to contribute all or part of the cost of his care in the hospital, someone must contribute it for him. Greater availability of tax-funds through an extension of the social security system, more self-help by group-insurance methods, and more philanthropy to make good the difference in accordance with the time-honored principles of charity, should go a long way to neutralize our discouragement on this score. And, as for the number of beds which we will require for the care of both the short-term and the long-term patient without distinction, it is sounder planning to provide two beds in the hospital, one a one plus one basis structurally. than to provide one bed in the hospital and one bed in the dumping ground at a distance to which we still consign so many of our most challenging clinical probems, to the eternal dishonor of the professions of medicine and social science."

The Hippocrat believes that there is a pressing need for a chronic disease hospital in this area. The weight of evidence seems to indicate that experience elsewhere has demonstrated the desirability of such an institution to be closely associated with an acute hospital. The Hippocrat hopes that by

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stimulating interest and discussion in this project a solution may be reached of the problem of the care of the chronic sick in this community.

Dr. Dwight O'Hara and Dr. John Conlin, our new medical director, will be with us at our February meeting on the last Tuesday of the month.

To the Editor of the Hippocrat:

The Post-graduate Medical Assembly, sponsored by the State Society, has finished its planned series of three meetings for the season. The subjects discussed were "Gastro-intestinal Diseases," "Blood Dycrasias," and "Biliary Tract Disease."

In each instance the speakers were young men who are taking part in advanced work in their fields and were highly qualified. In all instances they handled their subjects well with the limited time available. Each man briefly reviewed advance knowledge in his field and then went into detail on one particular phase.

The meetings were handicapped by lack of newspaper publicity and by the fact that the Springfield meetings were held in the morning. It was noted that attendance was particularly good among the men who are not active in the hospitals. This would indicate that the program was meeting a definite need.

It is felt that if these meetings are continued next year it would be better to post-card the membership of the Society and hold a Springfield meeting in the evening. In this event it is probable that a great many more men would take advantage of the opportunity and the results would more than justify the effort expended.

—James L. Smead.

WELL WE ARE BACK HOME

Business as usual—a great country and your welcome was swell. Understand while we were away, you also were regimented.

The Reds are not the only ones who hate the Fascists.

Been looking around and wonder if they are all in Washington.

Could it be that a few exist in Hampden County? Are you one? Of course not.

Names are queer things. A rose by any other name is just as sweet, and a selfish, vindictive lover of power is the proper handle—not Fascist.

Hell, we fought this war for you and me, to stamp out this very thing.

We are not asking for special privilege, we are asking you to give it up so let's stop the flag waving—the war is over.

Let's practice what we preach.

Let's cast our hate from our hearts and replace it with unselffish charity.

Let's be democratic—let's be gentlemen.

Let's prove the statement false that the medical profession is the most jealous profession in the world.

Do we still have to "belong" to take our place in line again?

Or have we just been suckers! "W."

For those who have long suspected Board Certification leaves much to be desired in the practice of good medicine, we would recommend to our readers the first article in the Journal of Bone and Joint Disease of January, 1947 by Dr. J. Albert Key of St. Louis in his Presidential Address to the American Orthopaedic Association. Hot Springs, Va., June 28, 1946. Among other things he says, "I doubt if 10% of our present membership could meet the present training requirements." Ed.

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DR. TIGHE

The Hippocrat desires herewith to bespeak our appreciation of Dr. Michael A. Tighe of Lowell as a friend and an invaluable Secretary of our State Society and especially to express relief in the knowledge of his recovery from a recent Coronary upset, that all too prevalent affliction of medical men. He is champing at the bit according to latest reports but must rest at least two months from all duties. To bridge the gap, President Dwight O'Hara has done well to appoint as Secretary pro tem Dr. Robert Nye, erstwhile member of the Hampden District Medical Society who runs our New England Journal so efficiently. We are forcibly reminded once more of the calibre of the service that the Massachusetts Medical Society is privileged to enjoy.

Dr. Walter Williams, a member of our District Society will preside at the annual convention of American Society for the Study of Sterility in Atlantic City, June 7-8, as its president.

Four hundred doctors, resonsible for the public and private health of the citizens of Hampden County, Massachusetts, with a population of 250,000 view with alarm the proposal now pending before Congress for the subordination of a specialist in medical science to a lay Cabinet officer, said specialist being put in the position of having his recommendations and medical advice disregarded in whole or in part, at the whim of this cabinet officer, his chief. We hereby respectfully request that you give this feature of Bill S545 your careful reconsideration to the end that the care and well-being of the sick in this bill be not relegated to the bureaucratic system which you were elected to combat.

Arthur Riorden,
Legal Chairman,
Hampden District Medical Society.